PART B - FEE(S) TRANSMITTAL

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maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 fe	or any change of address)	specifying a ne	N COIL	ote: A certificate of	mailing can only be used for	or domestic mailings of the				
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7590 11/22/2005 Klaus H. Wiesmann Battelle Memorial Institute 505 King Avenue Columbus, OH 43201-2693	il	> S	Cer hereby certify that th lates Postal Service w idressed to the Mail ansmitted to the USP	tificate of Mailing or Trans is Fee(s) Transmittal is bein ith sufficient postage for fir Stop ISSUE FEE address TO (571) 273-2885, on the o	g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.					
			-	Judy Readma	-)	(Depositor's name)				
			}	02/2/12	Kendmen 006	(Dun)				
A PRIVICATION NO.	1	FIRST NAMED IN	IVENIT(7 -	ATTORNEY DOCKET NO.	CONFIRMATION NO.				
10/600,901		Vincent D. Mo			12665DIV1	6803				
TITLE OF INVENTION: ELECTROOPTIC COMPO	UNDS AND METH		-	J	.20002111					
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APPLN. TYPE SMALL ENTITY	ISSUE F	EE	PUB	LICATION FEE	TOTAL FEE(S) DUE	DATE DUE				
nonprovisional NO	\$1400)		\$300	\$1700	02/22/2006				
EXAMINER	ART UN	ır	CLA	SS-SUBCLASS						
ROBERTSON, JEFFREY	ROBERTSON, JEFFREY 1712				570-113000 .					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Ch										
3. ASSIGNEE NAME AND RESIDENCE DATA TO										
PLEASE NOTE: Unless an assignee is identified recordation as set forth in 37 CFR 3.11. Completion	below, no assignee n of this form is NO	data will appear T a substitute for	on the	e patent. If an assign an assignment.	ee is identified below, the	document has been filed for				
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Battelle Memorial Institute Columbus, Ohio 01 FC:1501 1400.00 OP 02 FC:1504 300.00 OP										
Please check the appropriate assignee category or cate	gories (will not be pr	inted on the pate	ent):	☐ Individual ☐ C	orporation or other private g	roup entity Government				
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		Deposit Accou	nt Num	ber	(enclose an extra	copy of this form).				
5. Change in Entity Status (from status indicated about a Applicant claims SMALL ENTITY status. So		☐ b. Applican	it is no l	onger claiming SMA	LL ENTITY status. See 37 (CFR 1.27(g)(2).				
The Director of the USPTO is requested to apply the I NOTE: The Issue Fee and Publication Fee (if required interest as shown by the records of the United States F		tion Fee (if any) d from anyone o Office.	or to rether the	e-apply any previous in the applicant; a reg	y paid issue fee to the applic istered attorney or agent; or	cation identified above. the assignee or other party in				
Authorized Signature Daub	Wiss	<u>~</u>		Date		006				
Typed or printed name Klaus H. W				t	30,437					

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PTO/SB/17 (01-06)

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PART pursuant to the Consolidated App	Complete if Known								
	Application Nun	nber 10	0/600,901						
FEE TRANSMITTAL For FY 2006			Filing Date	06	5-20-2003				
			First Named Inv	entor Mo	cGinniss et al.				
	4.07	Examiner Name	Ro	Robertson, Jeffrey					
Applicant claims small entity s	tatus. See 37 CFR	1.27	Art Unit	17	1712				
TOTAL AMOUNT OF PAYMENT	(\$) 1,700.	.00	Attorney Docket	No. 12	12665DIV1				
METHOD OF PAYMENT (chec	k all that apply)								
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FEE CALCULATION (All the f			ing or may be	subject to	o a surcharge	>.)			
1. BASIC FILING, SEARCH, A FILII	ND EXAMINATIO NG FEES Small Entity		CH FEES	EXAMIN	IATION FEES				
Application Type Fee (Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)			
Utility 300	150	500	250	200	100				
Design 200	100	100	50	130	65				
Plant 200	100	300	150	160	80				
Reissue 300	150	500	250	600	300				
Provisional 200	100	0	0	0	0				
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee Paid (\$) Multiple Dependent Claims									
- 20 or HP = x = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = x = HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Total Sheets Fee Paid (\$)									
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)									
Other (e.g., late filing surch	arge): <u>Issue/Publica</u>	tion Fees				\$1,700			
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Signature
Registration No. 30,437
Telephone 614-424-6589
Name (Print/Type) Klaus H. Wiesmann
Date 02-21-2006

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OBASES .		Application Number	10/600,901		
TRANSMITTAL		Filing Date	06-20-2003		
FORM		First Named Inventor	McGinniss et al.		
		Art Unit	1712		
(to be used for all correspondence after initia	ıl filing)	Examiner Name	Robertson, Jeffrey		
Total Number of Pages in This Submission	5	Attorney Docket Number	12665DIV1		

ENCLOSURES (Check all that apply)													
V	Fee Trans	smittal Fo	orm		Draw	ing(s)					Allowance Communication to TC		
	Fe	ee Attach	ed	Ш	Licen	sing-related F	Papers				al Communication to Board peals and Interferences		
	Extension Express A Information Certified Cocumen Reply to I Incomplet	fter Final ffidavits/d of Time Abandonr on Disclos Copy of F t(s) Wissing P te Applica eply to M	eclaration(s) Request ment Request sure Statement Priority	Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks Fee Transmittal PTO/SB/17 (in duplicate)				e Address		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): PTOL-85 Fee Transmittal; PTO-2038; Return Receipt Post Card			
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Typed or printed name Judy Readman					_					Date	02-21-2006		

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